ŝ	rm 481 - Carrier Annual Reporting ollection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	439016	
<015>	Study Area Name	BUDGET PHONE, INC.	
<020>	Program Year	2014	
<030>	Contact Name: Person USAC should contact with questions about this data	Lakisha Taylor	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	318-671-5000	
<039>	Contact Email Address: Email of the person identified in data line <030>	lakishat@budgetprepay.com	
ANNUA	AL REPORTING FOR ALL CARRIERS		54.313 54.422 Completion Completion Required Required
<100>	Service Quality Improvement Reporting	(complete attached w	(check box when complete)
<200> <210>	Outage Reporting (voice)	(complete attached wind outages to report	orksheet)
<300> <310> <320> <330>	Unfulfilled Service Requests (voice) Detail on Attempts (voice) Unfulfilled Service Requests (broadband) Detail on Attempts (broadband)	233 90160k310 (attach descriptive do	
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice) Fixed 5.0 Mobile Number of Complaints per 1,000 customers (broad Fixed Mobile		
<800> <900> <1000> <1010> <1110> <1110>	Service Quality Standards & Consumer Protection F 4390160k510 Functionality in Emergency Situations 4390160k610 Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Terrestrial Backhaul (Y/N)? Terms and Condition for Lifeline Customers	Rules Compliance (check to indicate certi (attached descriptive do (check to indicate certi (attached descriptive do (complete attached wo (complete attached wo (complete attached wo (if yes, complete attached wo (check to indicate certi (attach descriptive do (if not, check to indicate certi (complete attached wo (complete attached wo (complete attached wo	cument) fication) cument) rksheet) rksheet) rksheet) rksheet) fication) cumentl fication) fication) rksheetl
<2000> <2005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Pric Rate of Return Carriers, Proceed to <u>ROR Additional</u>	e Cap Local Exchange Carriers (check to indicate certi) (complete attached wo	(ksheet)
<3005>		(complete attached wor	

1	rvice Quality Improvement Reporting	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
Jata Co	nection (orth	July 2013
<010>	Study Area Code 439016	
<015>	Study Area Name BUDGET PHONE, I	c.
<020>	Program Year 2014	
<030>	Contact Name - Person USAC should contact regarding this data Lakisha	aylor
<035>	Contact Telephone Number - Number of person identified in data line <030> 318-67	-5000
<039>	Contact Email Address - Email Address of person identified in data line <030> lakis	at@budgetprepay.com
<110>	Has your company received its ETC certification from the FCC?	(yes / no)
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) O
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your compa CETC which only receives frozen support, your progress report is only required to address voice telephony service.	
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attached Document (.pdf)
<113>	Maps detailing progress towards meeting plan targets	
<114>	Report how much universal service (USF) support was received	
<115>	How (USF) was used to improve service quality	
<116>	How (USF)was used to improve service coverage	
<117>	How (USF) was used to improve service capacity	
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	

(200) Service Outage Reporting (Voice)

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	439016			
<015>	Study Area Name	BUDGET PHONE, INC.			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor			
<035>	Contact Telephone Number - Number of person identified in data line <030> 318-671-5000				
<039>	Contact Email Address - Email Address of person identified in data line <030> lakishat@budgetprepay.com				

<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS									Did This Outage		
	Reference		Outage Start		Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected		Affected	Description (Check	Study Areas	Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
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Data Col	ce Offerings Including Voice Rate Data lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	439016
<015>	Study Area Name	BUDGET PHONE, INC.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	318-671-5000
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com
<701>	Residential Local Service Charge Effective Date 1/1/2013	
<702>	Single State-wide Residential Local Service Charge	

		1		Residential Local		<b4></b4>	Mandatory Extended Area	1
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and
		 						
								
				See att	ached worksheet			
				000 an	delica worksheet			
	<u> </u>							
	-							
	 	 						

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	439016
<015>	Study Area Name	BUDGET PHONE, INC.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <03	30> 318-671-5000
<039>	Contact Email Address - Email Address of person identified in data line <0	30> lakishat@budgetprepay.com

X CONTRACTOR	<a2></a2>	<b1></b1>	<b2></b2>	<∞	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowan Action Taken Wi Limit Reached (se
	 	 						
					<u> </u>			
			e attached					
 		work	sheet		 	 		
				ļ	<u> </u>			

Data Coll	erating Companies ection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	439016			
<015>		BUDGET PHONE, INC.			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor			
<035>	Contact Telephone Number - Number of person identified in data line <030)> 318-671-5000			
<039>	Contact Email Address - Email Address of person identified in data line <030	0> lakishat@budge	tprepay.com		
<810>	Reporting Carrier Budget PrePay, Inc. d/b/a Budget Phone Holding Company NA				
<811>	Troiding company				
<812>	Operating Company NA				
<813>	(₹a1>)		<a2></a2>		<a3></a3>
	Affiliates		SAC	Doing I	Business As Company or Brand Designation
		See a	ttached works	heet	
	The state of the s				
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				ļ	
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(900) Tribal Lands Reporting FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 Data Collection Form July 2013 <010> Study Area Code 439016 <015> Study Area Name BUDGET PHONE, INC <020> Program Year 2014 <030> Contact Name - Person USAC should contact regarding this data Lakisha Taylor <035> Contact Telephone Number - Number of person identified in data line <030> 318-671-5000 <039> Contact Email Address - Email Address of person identified in data line <030> lakishat@budgetprepay.com All of the territory served by Budget PrePay, Inc. in Oklahoma is considered tribal land. <910> Tribal Land(s) on which ETC Serves 439016ok920 Tribal Government Engagement Obligation <920> Name of Attached Document (.pdf) If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes: Select (Yes,No, NA) Needs assessment and deployment planning with a focus on Tribal <921> community anchor institutions; <922> Feasibility and sustainability planning; Yes <923> Marketing services in a culturally sensitive manner; NA Compliance with Rights of way processes <924> NA Compliance with Land Use permitting requirements <925> Compliance with Facilities Siting rules <926> NA <927> Compliance with Environmental Review processes NA <928> Compliance with Cultural Preservation review processes NA <929> Compliance with Tribal Business and Licensing requirements.

Section 1	Jerrestrial Backhaul Reporting	FCC Form 481 OMB Control No., 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	439016
<015>	Study Area Name	BUDGET PHONE, INC.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Lakisha Taylor
<035>	Contact Telephone Number - Number of person identified in data line <030>	318-671-5000
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budgetprepay.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

10/22/2013

Lifeline	ms and Condition for Lifeline Customers	· · · · · · · · · · · · · · · · · · ·		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		439016	
<015>	Study Area Name		BUDGET PHONE, INC.	
<020>	Program Year		2014	
<030>	Contact Name - Person USAC should contact regarding this data		Lakisha Taylor	
<035>	Contact Telephone Number - Number of person identified in data li	ne <030>	318-671-5000	
<039>	Contact Email Address - Email Address of person identified in data I	ine <030>	> lakishat@budgetprepay.com	
<1210> <1220>	Terms & Conditions of Voice Telephony Lifeline Plans Link to Public Website		Name of attached document (.pdf) www.freebudgetphone.com	
112202	Link to Fubile Website	HTTP		
	"Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:			
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	V		
<1222>	Details on the number of minutes provided as part of the plan,	✓		
<1223>	Additional charges for toll calls, and rates for each such plan.	/		

10/22/2013 Page 9

<015> St <020> Pr <030> Co <035> Co <039> Co <039 Co Co <039 Co <039 Co	trudy Area Name rogram Year Contact Name - Person USAC should contact regarding this data Lontact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> boxes below to note compliance as a recipient of Incremental Connect America		-
<015> St <020> Pr <030> Co <035> Co <039> Co <039 Co Co <039 Co <039 Co	tudy Area Name Program Year Contact Name - Person USAC should contact regarding this data Lontact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> boxes below to note compliance as a recipient of Incremental Connect American	.014 .akisha Taylor .318-671-5000 .lakishat@budgetprepay.com erica Phase I support, frozen High Cost support, High Cost support to offse	-
CHECK the E	Contact Name - Person USAC should contact regarding this data L Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> boxes below to note compliance as a recipient of Incremental Connect America	akisha Taylor 318-671-5000 lakishat@budgetprepay.com erica Phase I support, frozen High Cost support, High Cost support to offse	-
<035> Cc <039> Cd <03	contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> boxes below to note compliance as a recipient of Incremental Connect America	318-671-5000 lakishat@budgetprepay.com erica Phase I support, frozen High Cost support, High Cost support to offse	-
<039> Cr CHECK the b In <2010> <2011>	Contact Email Address - Email Address of person identified in data line <030> boxes below to note compliance as a recipient of Incremental Connect Ame	lakishat@budgetprepay.com erica Phase I support, frozen High Cost support, High Cost support to offse	-
CHECK the b in <2010> <2011>	boxes below to note compliance as a recipient of Incremental Connect Ame	erica Phase I support, frozen High Cost support, High Cost support to offse	-
<2010> <2011>	· · · · · · · · · · · · · · · · · · ·	** ** ** **	-
<2010> <2011>			
<2011>	ncremental Connect America Phase I reporting		
P	2nd Year Certification (47 CFR § 54.313(b)(1))		
	3rd Year Certification {47 CFR § 54.313(b)(2)}		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))	3	
	2013 Frozen Support Certification	,	
<2013>	2014 Frozen Support Certification		
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
P	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}		-
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting (47 CFR § 54.313(e))		
<2017>	3rd year Broadband Service Certification		
<2017>	5th year Broadband Service Certification		<u> </u>
<2019>	Interim Progress Certification		
<2020>	Please check the box to confirm that the attached PDF, on line 2021,		=
12020>	contains the required information pursuant to § 54.313 (e)(3)(ii), as a		-
	of CAF Phase II support shall provide the number, names, and address	·	
	• • • • • • • • • • • • • • • • • • • •		
	community anchor institutions to which began providing access to be	, 0000000	
<2021>	community anchor institutions to which began providing access to be service in the preceding calendar year.	Name of Attached Document Listing Required Information	

3000) Ra	te Of Return Carrier Additional Documentation		FCC Form 481
Data Colle	oction Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
	The same of the sa		July 2013
-			rano y
	439016		
<010>	Study Area Code	HONE, INC.	
<020>	Program Year 2014	HOME, INC.	
<030>		kisha Taylor	
<035>	Contact Telephone Number - Number of person identified in data line <030>	318-671-5000	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lakishat@budqetprepay.com	
CHECK ti	he boxes below to note compliance on its five year service quality plan (pursu $CFR\ \S\ 54.313(f)(2)$. I further certify that	ant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring the information reported on this form and in the documents attac	
	Progress Report on 5 Year Plan		
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i)) Please check this box to confirm that the attached PDF , on line 3012,	Name of Attached Document Listing Required Information	
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.		
(3012) (3013) (3014)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:	Name of Attached Document Listing Required Information	[Yes/No]
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required Information	(Yes/No)
, ,	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains		
(3019)	: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications		
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.		
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers.		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows		
(3026)		Name of Attached Document Listing Required 1-5	
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

	tion - Reporting Car lection Form	rier .		FCC Form 481 OMB Control No. 3060-0986/OMB Control July 2013	ol No. 3060-0819
<010>	Study Area Code	439016			
<015>	Study Area Name	BUDGET PHONE,	INC.		
<020>	Program Year	2014			

Lakisha Taylor

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

<030> Contact Name - Person USAC should contact regarding this data

<035> Contact Telephone Number - Number of person identified in data line <030> 318-671-5000

<039> Contact Email Address - Email Address of person identified in data line <030> lakishat@budgetprepay.com

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support		
recipients; and, to the best of my knowledge, the information repo	ted on this form and in any attachments is accurate.	
Name of Reporting Carrier: BUDGET PHONE, INC.		
Signature of Authorized Officer: CERTIFIED ONLINE	Date 10/22/2013	
Printed name of Authorized Officer: David Donahue		
Fitle or position of Authorized Officer: CFO		
Telephone number of Authorized Officer: 3186715000		
Study Area Code of Reporting Carrier: 439016	Filing Due Date for this form: 10/15/2013	

Certification - Agent / Carrier		FCC Form 481	and the state of t
Data Collection Form		OMB Control No. 30	060-0986/OMB Control No. 3060-0819
		July 2013	

<010>	Study Area Code	439016
<015>	Study Area Name	BUDGET PHONE, INC.
<020>	Program Year	2014
<030>	Contact Name - Person USA	C should contact regarding this data Lakisha Taylor
<035>	Contact Telephone Number	- Number of person identified in data line <030> 318-671-5000
<039>	Contact Email Address - Ema	il Address of person identified in data line <030> lakishat@budgetprepay.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier is authorized to submit the information reported on behalf of the reporting carrier. I I certify that (Name of Agent)_ also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. Name of Authorized Agent: Name of Reporting Carrier: Signature of Authorized Officer: Date: Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate. Name of Reporting Carrier: Name of Authorized Agent or Employee of Agent: Signature of Authorized Agent or Employee of Agent: Printed name of Authorized Agent or Employee of Agent: Title or position of Authorized Agent or Employee of Agent Telephone number of Authorized Agent or Employee of Agent: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. § 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Attachments

(800) Operating Companies Data Collection Form

FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	439016
<015>	Study Area Name	BUDGET PHONE, INC.
<020>	Program Year	2014
<030>	Contact Name - Person U	SAC should contact regarding this data Lakisha Taylor
<035>	Contact Telephone Numb	per - Number of person identified in data line <030> 318-671-5000
<039>	Contact Email Address - E	mail Address of person identified in data line <030> lakishat@budgetprepay.com
<810>	Reporting Carrier	Budget PrePay, Inc. d/b/a Budget Phone
<811>	Holding Company	NA .
<812>	Operating Company	NA NA

Affiliates	SAC	Doing Business As Company or Brand Designation
Budget PrePay, Inc.	439051	Budget Mobile
THE		

Although Budget tracks the total number of Unfulfilled Service Requests, the specific reason the unfulfilled request occurred is not tracked and recorded. Therefore, Budget is unable to provide details at this time.

Budget PrePay, Inc.

<u>Line 510 – Compliance with Service Quality Standards and</u> <u>Consumer Protection</u>

Budget PrePay, Inc. ("Budget") hereby certifies that it complies with applicable service quality and consumer protection practices in connection with its provision of wireline voice service. Among other things, Budget:

- Complies with the service standards promulgated by the State of Alabama.
- Discloses rates and terms of its voice services to customers.
- Provides contract terms to customers and confirms changes in voice service.
- Separately identifies carrier charges from taxes on billing statements.
- Provides ready access to customer service.
- Promptly responds to consumer inquiries and complaints received from government agencies.
- Abides by CPNI rules and other rules for the protection of consumer privacy.

Additional items that can be added if accurate:

- Makes available maps showing the local calling area.
- Allows a trial period for new voice service.
- Provides specific disclosures in advertising.
- Provides customers the right to terminate voice service for changes to contract terms.

BUDGET PREPAY INC. EMERGENCY BACKUP PROCEDURES

Budget PrePay Inc. has geographically located its switching infrastructure. This network design is in an effort to eliminate a single isolated power incident from affecting traffic on Budget PrePay's network. All facilities are equipped with both AC and DC battery backup as well as generators. All critical equipment is also supplied with 2 separate power sources (or primary and redundant power feeds).

Budget PrePay maintains multiple paths to reach our network. This is setup by using multiple IP transit providers for all IP connectivity and an N+1 configuration on all TDM connectivity. Once the origination traffic reaches the Budget PrePay network all elements are setup with the same N+1 configuration. The configuration allows each element a primary and redundant path to terminate the traffic without service interruption. In the event the main element fails or that element reaches maximum capacity Budget has designed the network to advance the traffic to 1 of 3 other elements in the same N+1 configuration that is listed above.

Budget PrePay has built the voice network to be self-sustaining in the event of a failure. The switching infrastructure will advance to the next termination carrier in route in the event of a failure on any termination carrier's route. Budget PrePay maintains a Least Cost Routing engine (LCR) that has over 20 carriers available to every call.

Budget has redundant, geographically separated call centers with the capability to route incoming calls as needed, and additional data processing capacity at each of its three datacenters that can accommodate extra workload as needed in the event of a systems outage. With daily GFS backups, monthly offsite tape backup, and a tertiary optical backup of critical SQL databases, data can be quickly restored in the event of a key systems failure. Budget maintains 24x7x365 support agreements on all key systems, with 4hr maximum response time specified where possible, so that technical support is always available.

In the event of a service impacting event, an initial investigation and impact analysis should determine whether the affected services can be restored within the timeframe of the MTO (Maximum Tolerable Outage). If it is uncertain that services can be restored within the MTO, a disaster is declared and a detailed incident investigation ensues. Based upon the results Budget will either correct the affected service(s) or invoke disaster recovery activities, such as routing all calls to the alternate call center and rerouting data and/or telecomm traffic to servers and equipment in the unaffected datacenters while the affected service is restored.